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APPLICANTS

Boris Y. Tsirlin, Libertyville, IL;

Clive P. Hohberger, Highland Park, IL;

Robert Gawelczyk, Chicago, IL; Daniel Donato, Mundelein, IL;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	IL	5	33	11

ADDRESS

31424
BABCOCK IP LLC
24154 LAKESIDE DRIVE
LAKE ZURICH, IL
60047

TITLE

Spatially Selective UHF Near Field Microstrip Coupler Device and RFID Systems Using Device

FILING FEE RECEIVED 1656	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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